

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FLORIDA FARM BUREAU FEDERATION FEDPAC

ADDRESS (number and street) ▼

5700 SW 34 Street

☐ Check if different than previously reported. (ACC)

Gainesville

FL

32608

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00283572

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Richardson

Signature of Treasurer

Robert Richardson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 03 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FLORIDA FARM BUREAU FEDERATION FEDPAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
01	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y Y Y
03	/	31	/	2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2012</td></tr></table>	Y	Y	Y	Y	Y	Y	2012							<table><tr><td colspan="6">47666.72</td></tr></table>	47666.72					
Y	Y	Y	Y	Y	Y															
2012																				
47666.72																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">47666.72</td></tr></table>	47666.72																		
47666.72																				
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="6">898.94</td></tr></table>	898.94						<table><tr><td colspan="6">898.94</td></tr></table>	898.94											
898.94																				
898.94																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">48565.66</td></tr></table>	48565.66						<table><tr><td colspan="6">48565.66</td></tr></table>	48565.66											
48565.66																				
48565.66																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">8000.00</td></tr></table>	8000.00						<table><tr><td colspan="6">8000.00</td></tr></table>	8000.00											
8000.00																				
8000.00																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="6">40565.66</td></tr></table>	40565.66						<table><tr><td colspan="6">40565.66</td></tr></table>	40565.66											
40565.66																				
40565.66																				
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**FLORIDA FARM BUREAU FEDERATION FEDPAC**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	2		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	1		2	0	1	2		

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized .....

890.00

890.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

890.00

890.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

890.00

890.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

8.94

8.94

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

898.94

898.94

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

898.94

898.94

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	8000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8000.00	8000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	8000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	890.00	890.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	890.00	890.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**FLORIDA FARM BUREAU FEDERATION FEDPAC**

Full Name (Last, First, Middle Initial)

**A. CONAWAY FOR CONGRESS**

Mailing Address PO BOX 51272

City  
MIDLANDState  
TXZip Code  
79710Purpose of Disbursement  
campaign contribution

011

Candidate Name

**CONAWAY FOR CONGRESS**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2012



Primary



General



Other (specify) ▼

State: TX

District: 11

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

14

2012

**Transaction ID : SB23.6737**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DENNIS ROSS**

Mailing Address PO BOX 7310

City  
LAKELANDState  
FLZip Code  
33807Purpose of Disbursement  
Political Contribution

011

Candidate Name

**FRIENDS OF DENNIS ROSS**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2012



Primary



General



Other (specify) ▼

State: FL

District: 12

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

02

20

2012

**Transaction ID : SB23.6727**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JOHN BOEHNER**Mailing Address 7908 CINCINNATI DAYTON ROAD  
SUITE ICity  
WEST CHESTERState  
OHZip Code  
45069Purpose of Disbursement  
campaign contribution

011

Candidate Name

**FRIENDS OF JOHN BOEHNER**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2012



Primary



General



Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

05

2012

**Transaction ID : SB23.6732**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

4500.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FLORIDA FARM BUREAU FEDERATION FEDPAC**

Full Name (Last, First, Middle Initial)

**A. ROS-LEHTINEN FOR CONGRESS**

Mailing Address PO Box 522784

City	State	Zip Code
Miami	FL	33152

Purpose of Disbursement  
campaign contribution

011

Candidate Name

**ROS-LEHTINEN FOR CONGRESS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2012

**Transaction ID : SB23.6740**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. RYAN FOR CONGRESS**

Mailing Address PO BOX 1488

City	State	Zip Code
JANESVILLE	WI	53547

Purpose of Disbursement  
campaign contribution

011

Candidate Name

**RYAN FOR CONGRESS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	20	/	2012

**Transaction ID : SB23.6728**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. SOUTHERLAND FOR CONGRESS**

Mailing Address PO BOX 1692

City	State	Zip Code
LYNN HAVEN	FL	32444

Purpose of Disbursement  
campaign contribution

011

Candidate Name

**SOUTHERLAND FOR CONGRESS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2012

**Transaction ID : SB23.6736**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FLORIDA FARM BUREAU FEDERATION FEDPAC**

Full Name (Last, First, Middle Initial)

**A. TOM ROONEY FOR CONGRESS**

Mailing Address 2336 S. East Ocean Blvd. #313

City	State	Zip Code
Stuart	FL	34996

Purpose of Disbursement  
campaign contribution

011

Candidate Name

**TOM ROONEY FOR CONGRESS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2012

**Transaction ID : SB23.6735**

Amount of Each Disbursement this Period

1500.00
---------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

8000.00